





**City  
of  
Milwaukee**

# JUNK COLLECTOR'S LICENSE APPLICATION

ccl-136b (06/04)

OFFICE OF THE CITY CLERK LICENSE DIVISION  
200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202  
(414) 286-2238 E-MAIL ADDRESS: LICENSE@MILWAUKEE.GOV

Check one: ☐ Individual or ☐ Partnership (Fill out Section A, B, & D)  
☐ Corporation or LLC (Fill out Section B, C, & D)

<b>Section A</b>	<b>INDIVIDUAL OR PARTNERSHIP:</b> Full Name (Last, First & Middle Initial)		Partner #2 Full Name (Last, First & Middle Initial)	
	Home Street Address:		Home Street Address:	
	Home City, State, Zip Code:		Home City, State, Zip Code:	
	Home Phone Number: (    )    -		Home Phone Number: (    )    -	
	Date of Birth:		Date of Birth:	
<b>Section B</b>	Business Name:		Business Phone Number: (    )    -	
	Business Address (include City, State, Zip Code):			
	Mailing Address (if different from above address):			
	Manager Name:		Home Phone Number: (    )    -	
	Home Address (Include City, State, Zip Code):			
	Vehicle Make:		Vehicle Year:	Vehicle Weight:
	Vehicle Plate #:		VIN #:	
	Address where this vehicle will be parked when not in use?			
<b>Section C</b>	Full Name of corporation or limited liability company:			
	Date and State of Incorporation:			
	<b>Agent:</b>			
	Full Name (Last, First & Middle Initial):			
	Home Street Address:		Home Phone Number: (    )    -	
	Home City, State, Zip Code:		Date of Birth:	

**OVER**

<b>C Cont.</b>	<i>President/Member</i>	<i>Vice President/Member</i>
	Full Name (Last, First & Middle Initial):	Full Name (Last, First & Middle Initial):
	Home Street Address:	Home Street Address:
	Home City, State, Zip Code:	Home City, State, Zip Code:
	Home Phone Number: (    )       -	Home Phone Number: (    )       -
	Date of Birth:	Date of Birth:
	<i>Secretary/Member</i>	<i>Treasurer/Member</i>
	Full Name (Last, First & Middle Initial):	Full Name (Last, First & Middle Initial):
	Home Street Address:	Home Street Address:
	Home City, State, Zip Code:	Home City, State, Zip Code:
<b>Section D</b>	<p>The undersigned agrees to inform the City Clerk within ten days of any substantial changes in the information supplied in this application. The undersigned shall not willfully refuse to provide the services offered under this license, or refuse to employ, or discharge any person otherwise qualified because of race, color, creed, sex, national origin or ancestry; and not seek such information as a condition of employment, or penalize any employee or discriminate in the selection of personnel for training or promotion on the basis of such information.</p> <p><b>I have knowledge of the City Ordinances currently regulating the license applied for herein, and say that I am the person named above and that all statements made in the foregoing application are true and correct.</b></p> <p><b>Note: Debris cannot be kept in the truck overnight if parked in a residential area.</b></p> <p>_____</p> <p>Individual/Agent of Corporation or LLC/Partner</p> <p>_____</p> <p>President of Corporation/Member of LLC/Partner</p> <p>_____</p> <p>Secretary of Corporation/Add'l Members/Partners</p>	

**Office Use Only:**

Initials: \_\_\_\_\_ Filed: \_\_\_\_\_ AD: \_\_\_\_\_ License #: \_\_\_\_\_ Granted: \_\_\_\_\_